File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, lowa 50319



# FOR INSTRUCTIONS, SEE BACK OF FORM

RECEIVED

Fax: 515-281-4073	DISCLOSURES	SUMMARY PAGE		UC	1 3 1 2007
COMMITTEE NAME (Musi	be same as on Statement of Organi	ization)	7		
Citizens f	or Henderson of the committee you are reporting for	7		ORM OR-2	DISCLOSURE
( 1 )Statewide/Leg/stative/Judge ( 4 )County Central Committee	e Standing for Retention Candidate (2) (5)County Candidate (6)City Candida unty PAC (9)City PAC (10)School Bo	te (7) School Board or Other Politica	, For	office Use On	REPORT
CANDIDATE COMMITTEES Capadidate Name Capadidate Name Capadidate Name Capadidate Name		Political Party (if applicable)  District (if Senate or House)	Sca	nned	
City Counci		District (if Seriate of House)			
1) Royald		377-6274 HH7-1784 TELEPHONE REPORT FOR (1) ELECTION Indicate by	1 /(2)NON-E	/0/30/ / <u>0/30/</u> DATES	07 07 IIGNED
□CHECK IF AMENDMENT	TO REPORT DATED	-	Local Comm	ittees, enter Da	ate of Election
	ination) report and attach Notice of e to file reports until a DR-3 is filed.)		County & Lo which Election		s, enter County in
STATE	MENT OF CASH ON HAND				
committee This ar	inning of the reporting period. (Tota mount MUST be the same as the ca period or must be zero if this is firs	ish on hand at the end	s	لولو ذ	1.4 <del>0</del> 137.43
ADD TOTAL MON	EY TAKEN IN THIS PERIOD				24 H2
	Contributions total (Attach Schedul			4,6	237.43
Schedule F: Loans	s Received total (Attach Schedule F	)			
Schedule H: Total	Sales of Campaign Property (Attack	h Schedule H)			<b>-</b>
<u>(Scheduk</u>	a H applies to Candidates' Comm	<u>ittees Only)</u> SUB-TOTAL	\$	52	99,85
SUBTRACT TOTA	L MONEY SPENT THIS PERIOD			11 -	356.77
Schedule B: Exper	nditures total (Attach Schedule B) (1	**also see debts and loans below)		4; 3	556.
Schedule F: Loan	Repayments total (Attach Schedule	F)			12.08
CASH ON HAND at the end	of this reporting period (if final repo	rt balance must be zero)	\$	<u> </u>	107
***UNPAID BILLS (From Sch	nedule D - Attach Schedule D)		\$	1,77	18,70
*IN KIND CONTRIBUTIONS	(From Schedule E - Attach Schedu	ule E)	\$	ios	3,50
"OUTSTANDING LOANS (	From Schedule F - Attach Schedule	F)	\$		-
CONSULTANT BREAKDON	MN (Schedule G Attached?)			_yes 🗶	NO
CANDIDATE COMMITTEES	SONLY:			_	
VALUE OF CAMPAIGN PR	OPERTY (From Schedule H - Attac	h Schedule H)	\$	NA	
STATE COMMITTEES: Sui	bmit a reconciled campaign account	t bank statement in January of ea	ch year.		

For Instructions, See Back of Form

## **CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

COMMITTEE NAME (Must be san	me as on Statement of Organization) He NCLEXSON	
Citiodia ioi	THE PROPERTY OF THE PROPERTY O	

	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
		CK THIS BOX IF NDING FORM

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL. THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	VIFFOR FUND- RAISER INCOME
10/24/07	<sup>CK#</sup>  436	Philip Ferren Po Box 30 Ottumus, IA 53501		\$ 100	
1019107	CK#10684	Deborah Roberts 4335 woodfield Lanene Cedar Rapicks 18 50402		100	
10/16/07	ID# CK# 1617	CLUA Hames 20. Box 217 Marion, 1A 50302		100	
10/21/07	CK# 6454	Scott olson bullet Quail Ridge brsw Cedar Rapids, 1A 52404		50	
9/28/07	CK#  677	Bernardo Branwehr 14605 Dellwood De. Urbandale, 18 50323		50	
7 25 07	CK# 8746	usuldo morris 4512 Lakeside Rd. Marion, 19 52302		100	
7125107	CK# <b>6407</b>	Carol Russell 6931 Bowman Lane NE Cedar Rapids, 1A 52402		25	
7/24/07	CK# 2432	Louise Johnson 112425th St. SE Cedar Rapids, IF 52403	hosbands grandmother	50	
7/29/07	CK# 6018	Lauri Hughes 6-70 colorado De Sw Cedar Repids, 14 52404		20	
7/28/07	ID# CK# <b>336</b>	Lupe Inskeep 1817 Driftwood Lanene Cedar Rupids, 19 52402		50	
		TOTAL (if last pag	SUB-TOTAL e of this schedule)	\$045	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumarne of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page / of 7 / (for Schedule A)

For Instructions, See Back of Form	Reset Form	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	MAGNETO III	<b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)			CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION DISCUSSIVE BOARD.

1. A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION DISCUSSIVE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER				
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	FUND- RAISER INCOME
7/27/07	CK# 81 65	Carol Gri mminger 3317 Terny Drse Occer Rapids, 1A 52403		\$ 25	
7/26/07	CK# 5503	tolores Byerly 1725 s. beloware Mason city, 14 50401		100	
7/24/87	CK# 10 586	Jack Eggleston 115 Alwine Ct Hiawatha, 1A 52233		25	
8129107	CK# <b>5 46</b> 0	leff Elgin 6940 Bowman Lane ne Cedar Ropids, 18 52402		200	
7/8/07	CK# 1694	Dennis Henderson 303 East Harnson St. Holstein, 18 51025	father-in-	100	
7/27/07	CK# 1093	David Kochel 730 Polk Blvd. Des Maines, 18 50312		100	
7116107	CK# 6050	Steven Knoth 887 High lander TR 1. Hudson, w 1 54016		200	
8/10/07	CK# 8050	Ronald and Thelma Kuhn Hele chatham Rdne Cedar Rapids, 18 50402	parents	300	
814/07	CK* 1964	Clarke Scanlon 9525 Century wood errek Johnston, 19 50131		100	
8/6/07	CK# SH2	Kathy Bogen— 230 Teak wood Lanche Cedar Rapids. 19 52402		100	
			SUB-TOTAL	\$1,250	
		TOTAL (if last page	of this schedule)	•	

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Page 2 of 7 (for Schedule A)

For Instructions.	See	Back	of	<b>Form</b>
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## CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
CHICENS FOR HENDERSON

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NOING FORM

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE (OWA ETHICS AND CAMPAIGN NUMBER AND ADDRESS OF THE PACE OF THE PA

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

	DAG ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ IF FOR
DATE RECEIVED	PAC ID NUMBER (if applicable)	INTELLIBRIDITION OF COMMUNICATION	TO CANDIDATE®	RECEIVED	FUND- RAISER
(MM/DD/YR)	AND PAC CHECK NUMBER		(ii dpp.notzio)		INCOME
	ID#	Hunter Parks		s /^^	
84107	CK# 1016	I - ord Street S(I)	:	\$ 100	
,,,,	CK# 1016	Cedar Rapids, 17 52904			
, ,	ID#	Caro   Downs 61 bson		100	
7/3/107	CK# 4346	laura lindou Bree		,,,,	
	1D#	Cedar Papids, 1A 52403			
مامام	IU#-	Jack Wheeler Lane \$23		50	
8/1/07	CK# 4397	River Fauls, WI 54022			
	ID#	Elizabeth Kuhn	1	0-	
8/7/07	01/4	4800 Reartice in.	Aunt	25	<u> </u>
DI 110 i	CK# 7917	Godfrey, IL 62035			
	ID#	many whisenard		25	
816107	CK#2726	4134 8. 3010 31.		25	L
		Des moines, 18 5317			<u> </u>
Ohalan	ID#	Date Stanek 310 2 Julie Lane		25	
8/10/01	CK# 9080	Gedor Ropids, 1A 52404	_	λ3_	
	ID#	Jim Millery			
7/20/07		Sun Day ou Ave SF	İ	100	
1 12010 1	CK# 2070	Cedar Rupids, 1A 50403	<u> </u>	<del></del>	
	1D#	many wet lauter		100	
7/28/07	CK# 8107	7525 Ainceton Dr NE		100	
	0,01	Cedar Respids, It 52402	la col anothe	<del> </del>	+
حماحما	ID#	Alice Henderson	husbands	25	
7/27/07	CK# 3202	1203 NOITH EST, APT 2203 Inchanola, IA 50125	grandmoth		
<del></del>	154	Charles Och arts			
7/27/0	CK# 1432	lebele walnot, suite 2500		25	L
' - " '	1952	Des moines 14 50301	0110 7074		
			SUB-TOTAL	\$ 575	
		TOTAL (if last page	ge of this schedule	,	7
				S	1

"Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 3 of 7 (for Schedule A)

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN** 

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BDARD.

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CATE	DAC ID NII IN ADDITION				
RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	▼ FFOR FUND- RAISER INCOME
811107	ок# <b>53(о</b> Н	Scott Olson 6467 Quail Ridgedrsw Cedar Rapids. IA 50464		\$ 50	
7/30/07	CK# 1960	Melissa Mundell 2509 Falbrook Drne Cedar Rapids, 14 52462		20	
7/27/07	ск# <b>ШЗ</b> (	Philip Forsen POBOX 30 Ottumux, IA 52501		100	
8/2/07	CK# 1027	Robert F. Kazimour PO BOX2207 Cedar Rapids, 1A 52406		300	
814107	ID# CK# 2971	Abigail Leland 1957 4th Avest Cedar Rapids, 1A 52403		25	
8/8/07	CK# 210	Douglas olson 2190 Country club PKWYSE Cedar Rapids, 17 52/03		100	
813/67	CK# 2466	Janet Hockstra 2119 5 Ave NE Cedar Rapids, 1A 52402		200	
9/24/01	CK# <b>5698</b>	Kulachandra Nanjappa 6913 Surrey Dr. NE Cedar Rapids, 1A 52402		0	
8/21/67	CK# 16 603	Deboran Roberts 4335 woodfield Lane 11 & Cedar Rupids, 1A 52402		50	
8/19/07	ID# CK# 4787	Mary Day 845 N. 124 Ave Higwathe, 1A 52233		25	
		TOTAL (if had now	SUB-TOTAL	\$ 890	
		TOTAL (if last page of	or uns scheadle)	_	ĺ

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For	instructions,	Sea	Rack	of Earn
	MAGRICULTS.	JU	Oack	or rom

# CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)	7
Citizens for Henderson	

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
CHEC	CK THIS BOX IF
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STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION DISCLOSURE BOARD.

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DATE RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	1 1 1550
(MM/DD/YR)	AND PAC CHECK NUMBER		TO CANDIDATE* (if applicable)	RECEIVED	FUND RAISEI
9/16/07	3436	Suzanne Kyanzahn 7417 Idledate Relne Cedar Rapids, 1A-52402		\$ 75	INCOM
8/26/07	CK# <b>7915</b>	Guy Wendler 3550 Cottage brove Ave 85 Cedar Rapids, 1A 50403		100	
8/25/6		Bandra wol cott- 180 Brentwood Dr NE Redar Rapids, 18 52402		25	
8/27/07		Kyle Skogman 4757 Hillory windly Manon, 18 52302		200	
9/10/07	CK# 7618	Terry Ebough 2719 Cedar Ridge In TE Cedar Rapids, 18 52402		50	
9/5/67		Thomas Alleri 1089 Cedar Woods Rd Cedar Rapids, 14 52403		100	
9/4/07	CK# 1438	lla Rooks 3093 ctue ext. Manon, 19 52302		25	
9/16/07	CK# [609	CuA Hames P.O. Dox 217 Manon, 1A 52302		200	
3/27/07	CK# 5630	Anind Dandekar 8731 28th Ave manon, 19 52302		100	~
1/27/67	CK# <b>506</b> 1	Ganj Grant 1266 Norwood Drive SE Cedar Rapids, IA 50 403		150	~
		TOTAL (if last page of		\$ 1,025	

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Page 5 of 7 (for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
1/20/07	ID# CK#	KevinmcLaughlin 4244 Foster Drive Des moires, 14 56312		\$ /00	
8/20107	ID# CK# <b>2727</b>	Scot cottington  8353 Young man Ave#419  St. Paul, MN 55116		50	
811/07	ID# CK#	Bank Interest		.29	
9/1107	ID# CK#	Bank Interest		-67	
211167	ID# CK#	Bank Interest		-19	
701118	ID# CK#	Bank Interest		.24	
411167	CK#	Bank Interest		.26	
5/1/07	ID# CK#	Bank Interest		.26	
6/1107	ID# CK#	Bank Interest		.26	
7/1107	ID# CK#	Bank Interest		.26	
			SUB-TOTAL	s 152,43	

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by mamage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

TOTAL (if last page of this schedule)

### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization) Citizens-for Henclerson	COMMITTEE NAME (Must be same	as on Statement of Organization)
	Citizens-for	Henderson

SCHEDULE	
<b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NOING FORM

Reset Form

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
1/20/07	CK# <b>\\\</b>	Jennifer Dear 730 Pak Blvd. Des Moines, 18 50312		\$ /00	
	ID# CK#				
			SUB-TOTAL	sino	

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Page 7 of 7

TOTAL (if last page of this schedule)

FOR INSTRUCTIONS, SEE BACK OF FORM

Children - Dikker	*******
	12
	4000

SCHEDULE В (Rev. 07/03)

MONETARY **EXPENDITURES** 

CHECK THIS BOX IF AMENDING FORM

# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)
CITIZENS For Henderson

	00110 170	I PORTURE SUPI		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/10/07	ID# CK# (036	United States Post office Northeast Cedar Rapids, 1A 52402	Stamps	\$ \@3.∞
9/13/07	ID# CK# /037	Fine line Printing 1075 Hawkeye Inbe fliawatha, 14 52233	campaign literature	468.10/
10/3/07	CK# <b>/03/8</b>	In Sync 820 N 20th Ave Hiavath 2, 1A 52233	yardsigns	647.5
10/4/07	10001	Treasurer, Linn co. Linn County Auditor Cedor Ropids. 1A	voter lists	23.∞
10/12/67	ID# CK# <b>/04</b> 0	Kim Reem 4862 Foxtail Count Manon, 117 52300	Lists	40.00
10/2do1	ID# CK# <b>/04</b> 1	United States Post office Northeast Cedar Rapids, 18 52402	Stamps	41.00
10/21/01	CK# 1042	Kim Reem 4842 Foxtail aun- manon, 14 50302	design work! Direct-mail	300,∞
10/22/07	CK# /643	Gazetto Database Mari 5003rd Ave 85 Cedar Rapids, 1A 52401	wing Direct mail	794.32
			SUB-TOTAL TOTAL (If last page of this schedule)	\$2,376,57

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page	/	of 2

FOR INSTRUCTIONS, SEE BACK OF FORM

ACCOUNT TOWN	Reset Form	
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### EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

ŀ	SCHEDULE	
	<b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
	_	CK THIS BOX IF

COMMITTEE	NAME (Must be s	same as on Statement of Organization) FOR HUNDERSEN		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/25/07 10/25/07	CK# 10Ckf	Gazelle Database Marketn 500 3rd Ave 85 Cedlar Rapick, 181 52401	mail	5423,64 566.46
10/25/67	1645	Gozelle Datalorse Marketh Eco Brethvese Cedar Rapids, 11752/01	MS Directmail	566.46
	ID# CK#			
	CK#			
	ID# CK#			
	ID#			
	ID#			
	ID# CK#			
			SUB-TOTAL	\$ 99A 10

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expanditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page <u>**2**</u> of <u>**2**</u>

\$4,356.

TOTAL (if last page of this schedule)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE NAME (MUST be Same as an ordinary
0
LISTOON C SAN TUNKA SAL
Citizens for Henderson

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

R	eset I	om
	13.1	

SCHEDULE D (Rev. 08/98)	INCURRED
	CK THIS BOX MENDING RM

DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD (DO NOT INCLUDE LOANS - SHOW LOANS ON SCHEDULE F) An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
9/16/07	Sarah Henclerson 118 Teakwood Lane NE Cedar Rapids, 18 52402	mailing labels Envelopes, Paper	43,31
918107	Sarah Henderson 118 Taakvoood Lane NE Cedar Rapids, 14 52402	wireties	18.52
10/26/07	Garah Henclerson	Paper, Envelopes	17.08
8/23/07	Sarah Henderson 118 Teakwood Lane 118 Bedar Rapids, 17 52402	yard signs (large)	575,50
10/20/07	Sarah Henderson 118 Teckwood Lake 19E Gedar Rapids, 1A 52402	Paper	િ. <sup>58</sup>
7/20/07	Sarah Henderson	Stamps	82.00
9/1/07-		mileage (43×48.54)	25.71
	TOTAL DEBTS OWED BY COMMITTEE AT	SUB-TOTAL THE END OF THIS REPORTING PERIOD	768.70

\*If actual figure is unknown, show "estimated" beside the figure.

of of (for Schedule D)

CANDIDATE COMMITTEES NOTE:

"Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCT	IONS, SEE BACK OF FORM		SCHEDULE	- 1
COMMITTEE	NAME (Must be same as on Statement of Organization)		СН	INCURRED INDEBTEDNESS IECK THIS BOX
NOTE: Debts   Schedu	previously reported that remain unpaid must be included on this ule, as well as any new obligations incurred in this period.	Rest Ponis	1	AMENDING RM
(DO NOT IN	LIGATIONS REMAINING THIS REPORTING PERIO ICLUDE LOANS SHOW LOANS ON SCHEDULE	)D F)	goods or ser received, but end of the re	d debt" is a debt for rvices ordered or at not paid for by the eporting period., of whether an invoice ceived.
DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS SERVICES PROVIDED O PURCHASED	OR B	ALANCE OWED AT CLOSE OF REPORTING PERIOD*
7/20/07	Cedar Rapids, 17 52402	envelopes, pap	ær <sup>\$</sup>	10,00
10/67	Fine line Printing 1075 Hawkeye Drive Hiawatha, 17 52233	Printing of campaign materials	E	stimuted 1,000
			TOTAL \$	10,00
	TOTAL DEBTS OWED BY COMMITTEE AT T	HE END OF THIS REPORTING PI	ERIOD \$	10, <u>co</u> 1778. <sup>70</sup>

"If actual figure is unknown, show "estimated" beside the figure.

CANDIDATE COMMITTEES NOTE:

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FOR INSTRU	CTIONS, SEE BACK OF FORM			SCHEDULE	
Citi	EE NAME (Must be same as on Statement of Organiza  VENS FOY HENDERSO	ation)		E (Rev. 05/97)	IN-KIND CONTRIBUTIONS
			Reset Form	CHECK AMEND	THIS BOX IF ING FORM
DATE RECEIVED	NAME AND ADDRESS	RELATIONSHIP TO CANDIDATE	DESCRIPTION OF IN KIND	ESTIMATED	√ IF FOR
9/27/07	ArvindDandellar 2731 28th Ave manon, IH 50302	* (if applicable)	food for reception	FAIR MARKET VALUE \$	FUND-RAISER CONTRIBUTION
10/20/67		Self	flood for volunteers	8.50	
	·				
			SUB-TOTAL  TOTAL (if last page of this schedule)	108.50	

"Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page of \_\_\_\_